P/4058-16

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

    Michael REHBERGER   Date: September 3, 2004

Serial No.: 10/722,927   Group Art Unit: 2633

Filed: November 25, 2003   Examiner: –

For: LED DEVICE

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

Sir:

    This is a response to the Notice of Incomplete Reply dated August 24, 2004 in the above-identified application.

FEE CALCULATION

    Any additional fee required has been calculated as follows:

    _____ If checked, "Small Entity" status is claimed.

NO. CLAIMS AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	EXTRA PRESENT		RATE	ADDIT. FEE
TOTAL	MINUS	* =		X	($9 SE or $18)	$
INDEP.	MINUS	** =		X	($43 SE or $86)	$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				X	($145 SE or $290)	$

* not less than 20 ** not less than 3   TOTAL $

    If any additional payment is required, a check which includes the calculated fee of $____

(OFGS Check No. _____) is attached.

00669671.1

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. § 1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. § 1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

SUMMARY OF AMENDMENTS

1. ___ If checked, an abstract (an amended abstract) is submitted herewith.

2. √ If checked, amendment(s) to the drawings are submitted herewith.

3. √ If checked, amendment(s) to the specification are submitted herewith.

4. ___ If checked, amendment(s) to the claims are submitted herewith.